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**Date:** 8/9/05

**To:** Commissioner for Patents

**Fax:** (571) 273-8300

**From:** Raymond R. Ferrera, Esq.

**Pages:** 3 (including cover page)

**Re:** *A New Obstetrical Vacuum Extractor with a  
Pull-Sensing Handle Grip*  
Serial No.: 10 / 615,566  
Our ref.: P31343US

**Comments:** Please see the attached.

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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AUG 09 2005

In re Application of: Nicola Perone

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Group Art Unit: unknown

Application No.: 10 / 615,566

Examiner: unknown

Date Filed: July 8, 2003

Title: A New Obstetrical Vacuum Extractor  
with a Pull-Sensing Handle Grip

Docket No.: P31343US

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450Certificate of TransmissionI hereby certify that this Revocation and Power of Attorney is being  
facsimile transmitted to the Patent and Trademark Office (Fax No. 571-  
273-8300) on the date indicated below.Signature: [Signature]  
Date: August 9, 2005

Dear Sirs:

## TRANSMITTAL LETTER

Transmitted herewith for filing in the above-identified case is a Revocation of Power of Attorney form executed by Nicola Perone, the applicant/inventor of the above-identified case.

No fee is believed to be due with the submission of this document, however, the Commissioner is hereby authorized to charge Deposit Account No. 01-2511 for any underpayment of the fees required under 37 CFR §§ 1.16-1.17, or credit the account for any overpayment.

Respectfully submitted,

Date: August 9, 2005

By:

Ray FerreraRaymond R. Ferrera  
Reg. No. 47,559  
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From: 713 868 1179 Page: 4/4 Date: 8/9/2005 3:45:27 PM

PTO/SB/82 (04-05)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/615,566
Filing Date	07/08/03
First Named Inventor	Perone
Art Unit	unknown
Examiner Name	unknown
Attorney Docket Number	P31343US

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

28805

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with  
Customer Number:

28805

OR

☐ Firm or  
Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Nicola Perone

Date

8/9/05

Telephone

713/868-1168

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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